

UNITED STATES COURT OF APPEALS FOR THE FOURTH CIRCUIT

APPEARANCE OF COUNSEL FORM

No. 17-04331

THE CLERK WILL ENTER MY APPEARANCE AS COUNSEL ON BEHALF OF:

United States

as the

(party name)

☒ appellant(s) ☐ appellee(s) ☐ petitioner(s) ☐ respondent(s) ☐ amicus curiae ☐ intervenor(s)

/s/ Thomas M. Sullivan

(signature)

If you have not been admitted to practice before the Fourth Circuit, you must complete and return an application for admission. If you were admitted to practice under a different name than you are using now, you must include your former name when completing this form so that we can locate you on the attorney roll.

Thomas M. Sullivan

301-344-0173

Name (printed or typed)

Voice Phone

USDOJ/USAMD

301-344-4516

Firm Name (if applicable)

Fax Number

6500 Cherrywood Lane

Greenbelt, MD 20770

thomas.sullivan@usdoj.gov

Address

E-mail address (print or type)

☐ I am not participating in this case. Appellate counsel is:

(Name)

(Phone)

REGISTRATION AS AN APPELLATE ECF FILER

Electronic filing of documents by counsel is required in all Fourth Circuit cases. If you have not registered as a Fourth Circuit ECF Filer, please complete the required steps at www.ca4.uscourts.gov/cmecftop.htm.

CERTIFICATE OF SERVICE

I certify that on 6/08/2017 the foregoing document was served on all parties or their counsel of record through the CM/ECF system if they are registered users or, if they are not, by serving a true and correct copy at the addresses listed below:

/s/ Thomas M. Sullivan

Signature

6/08/2017

Date